

Village Care Home (Murton) Limited

The Village Nursing and Care Home @ Murton

Inspection report

Wellfield Road
Murton
Seaham
County Durham
SR7 9HN

Date of inspection visit:
21 November 2019

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23 December 2019

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

The Village Nursing and Care Home @ Murton is a care home which can provide nursing and personal care for up to 40 people. At the time of this inspection there were 36 people living at the service, some of whom were living with a dementia.

People's experience of using this service and what we found

People told us they were happy with their care. Staff understood how to keep people safe. Effective recruitment procedures were in place and people received care in a timely way. The environment and equipment were safe and well maintained. People were protected from the risks associated with the management of medicines and the spread of infection.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People were assisted to eat and drink enough to maintain their health and welfare. Staff received appropriate training and supervision. People's health was well managed. Staff worked closely with other professionals to provide effective care.

Staff were kind and caring. Staff had developed caring relationships with people and respected their privacy and dignity. People's independence was promoted. Staff ensured people maintained links with their friends and family.

People's care was based on detailed person-centred care plans. A range of activities were available. People felt confident raising concerns. Complaints had been dealt with effectively. Staff were aware of good practice and guidance in end of life care. People's religious beliefs and preferences were respected.

Management systems were in place to monitor the quality of the care provided. Feedback was used to make continuous improvements to the service. The home was well managed.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This is the first inspection of this service which registered with CQC on 2 November 2018.

Why we inspected

This was a planned inspection based on the date the service first registered with CQC.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

The Village Nursing and Care Home @ Murton

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector, a specialist advisor in nursing and an Expert by Experience. The Expert by Experience had personal experience of caring for someone who used this type of care service.

Service and service type

The Village Nursing and Care Home @ Murton is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who worked with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with 10 people and six relatives. We spoke with the registered manager, compliance manager, clinical lead, five care staff, a kitchen assistant, two maintenance workers and a visiting healthcare professional.

We observed how people were being cared for and reviewed a range of records. This included four people's care and medication records. We looked at the personnel files for four staff and we reviewed records related to the management and quality assurance of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question was rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. Comments included, "I feel safe and secure here" and "There is staff around 24 hours so if I need anything, I can call someone."
- The provider had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm or abuse.

Assessing risk, safety monitoring and management

- Risks to people were assessed and monitored. Care plans were in place to mitigate risks and were reviewed regularly.
- Systems were in place to support people in the event of an emergency, such as a business continuity plan. Each person had a personal emergency evacuation plan which contained information about how best to support them during an evacuation.
- The environment was well maintained and equipment was safe.

Staffing and recruitment

- The provider operated a safe recruitment process.
- There were enough staff on duty to meet people's needs. People and relatives told us they could always find staff and they attended to them in a timely manner when needed. Some commented that staff were very busy at times but told us their needs were met. One person said, "They are champion, cannot fault them. Always busy."

Using medicines safely

- Medicines were managed safely. Staff who administered medicines were trained. They were knowledgeable about people's medicines.
- People were happy with the support they received to take their medicines.
- Medicine audits and checks were completed regularly.

Preventing and controlling infection

- The home was clean.
- Staff followed the provider's policies and procedures to promote good infection control.
- Equipment was available to help prevent the spread of healthcare related infections.

Learning lessons when things go wrong

- The service responded appropriately when accidents and incidents occurred. Records were analysed for

patterns or trends and incidents were used as a learning opportunity.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question was rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs and choices were recorded in detailed pre-admission assessments. These were used to develop people's care plans.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and skilled. They carried out their roles effectively.
- Staff received regular supervision and appraisal. They said they felt supported.

Supporting people to eat and drink enough to maintain a balanced diet

- People told us they enjoyed their food and had a choice of meals. Comments included, "They will make you anything that you want" and "I just love my food and I enjoy what I get here."
- Staff were knowledgeable about people's special dietary needs and preferences.
- People's weight was monitored closely, when required. Detailed records were completed and regularly reviewed. Professionals were involved as appropriate.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager followed the principles and guidance related to MCA and DoLS.
- Staff knew what they needed to do to make sure decisions were taken in people's best interests.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People told us they received health care support when needed.

- People's care records showed relevant health care professionals were involved with their care. This included, GPs, speech and language therapists, dieticians, Macmillan nurses, dentists and chiropodists.

Adapting service, design, decoration to meet people's needs

- People were involved in decisions about the design and the decoration of the home. People's bedrooms had been personalised to reflect their tastes and interests.
- The provider had a programme to decorate the home in ways which promoted maximum independence for people living with dementia. This included, themed murals, sensory and reminiscence walls, colour coding and picture signage.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question was rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and relatives were happy with the care provided. They said staff were kind and caring. Comments included, "Staff are wonderful" and "Staff are good here. Always seem nice and help you if you need anything."
- Relatives confirmed they could visit whenever they wanted and were made to feel welcome.
- Staff showed concern for people's wellbeing. Equality and diversity were recognised by the provider and staff. People were supported to maintain their religious beliefs.

Supporting people to express their views and be involved in making decisions about their care

- People and their relatives were involved in decisions about their care.
- The staff team worked well together and with the people who used the service. They understood people's communication needs and consistently engaged people in conversations. One person told us, "All of the staff here are happy to help and they will have a joke as well."
- Information was available for people to access advocacy services. Advocates provide impartial support to people and communicate decisions.

Respecting and promoting people's privacy, dignity and independence

- People were respected and shown patience and understanding by staff. One relative said, "The staff are all spot on to be honest and my family member seems happy with them."
- The staff maintained the privacy and dignity of the people they cared for. They were clear this was a fundamental part of their role.
- People's independence was promoted.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

This is the first inspection for this newly registered service. This key question was rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People had personalised care plans. They clearly described the care and support people required to meet their needs. People and relatives were involved in creating the plans of care.
- People were empowered to make choices. They had as much control of their care as possible.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People expressed mixed views about the activities provided. Comments included, "I would love more activities", "I don't really mind, I like to watch television a lot in my room" and "There has not been much going on lately but hopefully there will be soon, we have been told."
- The provider had listened to people's feedback. They had appointed two activities co-ordinators to provide activities seven days a week. Planned activities, outings and events included, bingo, board games, crafts, a Christmas fayre, lunch at the Glebe Centre, sing along, entertainers and a visit to the local garden centre.
- Staff supported people to maintain important relationships.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed and recorded in their care plan.
- Most people using the service were able communicate their needs to staff without support. Where people had difficulties with communication, information was made available in different formats.

Improving care quality in response to complaints or concerns

- The provider had a structured approach to dealing with complaints.
- People and relatives told us they felt confident to raise concerns. One person told us, "I have never had any complaints." A relative said, "I don't have complaints. I am happy with everything. My family member is happy here."

End of life care and support

- People were supported to make decisions about their preferences for end of life care. Staff empowered people and relatives in developing care plans. Professionals were involved as appropriate.

- Staff understood people's needs. They were aware of good practice and guidance in end of life care.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question was rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager and staff understood their roles and responsibilities.
- The provider monitored the quality of the service and visited regularly to make sure a high standard of care was delivered.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The home had a positive atmosphere. Staff morale and teamwork were good. Staff were enthusiastic about ensuring people received good care and support. Staff told us the best part of their job was ensuring residents were well looked after.
- People and relatives told us the service was well-led. Communication was good and staff were approachable. Comments included, "Yes, it is well-led. I would recommend it here" and "I am happy with the staff here and the Manager. I feel my family member is in a good place and that they do a good job."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The views of people, relatives and staff were regularly sought. They were invited to regular meetings and sent annual surveys. Their feedback was used to make changes and improvements to the service.
- Staff told us the registered manager was approachable and supportive. They felt they had been consulted about changes to enhance the service and had an opportunity to contribute.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager acted in an open and transparent way. They submitted statutory notifications to CQC following significant events at the home.
- A visiting healthcare professional told us the home had an open and honest culture.

Continuous learning and improving care

- The provider had an effective quality assurance system to review areas of the service and to drive improvement.

Working in partnership with others

- Staff worked in partnership with health and social care professionals to achieve good outcomes for people. A visiting healthcare professional spoke highly of the service. They told us staff would share any concerns with them and looked at options to resolve these.
- The service had good links with the local community and other key organisations. This reflected people's needs and preferences.